

10/749035

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10749035

## CLAIMS AS FILED - PART I

|                                  | (Column 1)    | (Column 2)               |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS                     | 28            |                          |
| FOR                              | NUMBER FILED  | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 28 minus 20 = | * 8                      |
| INDEPENDENT CLAIMS               | 5 minus 3 =   | * 2                      |
| MULTIPLE DEPENDENT CLAIM PRESENT |               | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

|  | (Column 1) | (Column 2)                       | (Column 3)                         |
|--|------------|----------------------------------|------------------------------------|
| AMENDMENT A                                    | 2/22/07    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total  | * 27       | Minus                            | ** 28 = 0                          |
| Independent                                    | * 5        | Minus                            | *** 5 = -0                         |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |            |                                  | <input type="checkbox"/>           |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 385.00 |
| XS 9=     |        |
| X43=      |        |
| +145=     |        |
| TOTAL     |        |

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 770.00 |
| XS18=     | 164    |
| X86=      | 172    |
| +290=     |        |
| TOTAL     | 1028   |

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

| RATE       | ADDI-TIONAL FEE |
|------------|-----------------|
| XS 9=      |                 |
| X43=       |                 |
| +145=      |                 |
| TOTAL      |                 |
| ADDIT. FEE |                 |

| RATE       | ADDI-TIONAL FEE |
|------------|-----------------|
| XS18=      |                 |
| X86=       |                 |
| +290=      |                 |
| TOTAL      |                 |
| ADDIT. FEE |                 |

|  | (Column 1) | (Column 2)                       | (Column 3)                         |
|--|------------|----------------------------------|------------------------------------|
| AMENDMENT B                                    |            | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total  | *          | Minus                            | **                                 |
| Independent                                    | *          | Minus                            | ***                                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |            |                                  | <input type="checkbox"/>           |

| RATE       | ADDI-TIONAL FEE |
|------------|-----------------|
| XS 9=      |                 |
| X43=       |                 |
| +145=      |                 |
| TOTAL      |                 |
| ADDIT. FEE |                 |

| RATE       | ADDI-TIONAL FEE |
|------------|-----------------|
| XS18=      |                 |
| X86=       |                 |
| +290=      |                 |
| TOTAL      |                 |
| ADDIT. FEE |                 |

|  | (Column 1) | (Column 2)                       | (Column 3)                         |
|--|------------|----------------------------------|------------------------------------|
| AMENDMENT C                                    |            | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total  | *          | Minus                            | **                                 |
| Independent                                    | *          | Minus                            | ***                                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |            |                                  | <input type="checkbox"/>           |

| RATE       | ADDI-TIONAL FEE |
|------------|-----------------|
| XS 9=      |                 |
| X43=       |                 |
| +145=      |                 |
| TOTAL      |                 |
| ADDIT. FEE |                 |

| RATE       | ADDI-TIONAL FEE |
|------------|-----------------|
| XS18=      |                 |
| X86=       |                 |
| +290=      |                 |
| TOTAL      |                 |
| ADDIT. FEE |                 |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.